2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G71748

FILED Feb 17, 2005 Secretary of State

Entity Name: FISHER, RUSHMER, WERRENRATH, DICKSON, TALLEY & DUNLAP, P.A.

Current Principal Place of Business: New Principal Place of Business: 20 N. ORANGE AVENUE **SUITE 1500** ORLANDO, FL 328014623 **New Mailing Address: Current Mailing Address:** 20 N. ORANGE AVENUE **SUITE 1500** ORLANDO, FL 328014623 FEI Number: 59-2340363 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FISHER, JOHN EDWIN 20 NORTH ORANGE AVE. **SUITE 1500** ORLANDO, FL 32801 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete Title: (X) Change () Addition

Address:

City-St-Zip:

5709 BEAR LAKE CIRCLE

APOPKA, FL

Title: FISHER, JOHN, FISHER, JOHN, Name: Name: 1100 WEST 2ND AVE. 1100 WEST 2ND AVE. Address: Address: City-St-Zip: WINDERMERE, FL City-St-Zip: WINDERMERE, FL US Title: VD Title: VD () Delete (X) Change () Addition Name: RUSHMER, GARY H., Name: RUSHMER, GARY H., 1000 SWEETBRIAR RD. 1000 SWEETBRIAR RD Address: Address: ORLANDO, FL 32806 US ORLANDO, FL City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: SD () Delete SD WERRENRATH, REINALD,, III WERRENRATH, REINALD,, III Name: Name:

Title: TD () Delete Title: (X) Change () Addition DICKSON, RUSSELL K.,, JR. DICKSON, RUSSELL K.,, JR. Name: Name: Address: 1241 MAYFIELD AVE. Address: 1241 MAYFIELD AVE. City-St-Zip: City-St-Zip: WINTER PARK, FL WINTER PARK, FL 32789 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JOHN EDWIN FISHER PD 02/17/2005

5709 BEAR LAKE CIRCLE

APOPKA, FL 32803 US